

RESIDENTIAL BUILDING PERMIT APPLICATION

CAMPBELL COUNTY PLANNING & ZONING

1098 Monmouth Street, Suite 343, Newport, KY 41071

Phone (859) 292-3880 Fax (859) 547-1868

www.campbellcountyky.org

1. ADDRESS OF PROPOSED CONSTRUCTION _____

If an address has not yet been assigned, attach a completed "House Number Application" form

2. PROJECT IS LOCATED IN ☐ Unincorporated Campbell County, **OR IN THE CITY OF**
☐ California ☐ Crestview ☐ Dayton ☐ Melbourne ☐ Silver Grove ☐ Southgate ☐ Woodlawn

SUBDIVISION _____ LOT # _____ DEED BOOK _____ PAGE _____ PIDN 999-99-__-____-__

	OWNER *	CONTRACTOR**	APPLICANT
NAME			
ADDRESS			
CITY			
STATE/ZIP			
PHONE #			
FAX #			
CELL #			
E-MAIL			

* *If the owner is the General Contractor, only attach a copy of the homeowner's Certificate of Liability Insurance.*

** *If the owner is not the General Contractor, attach a copy of the General Contractor's Liability and Workers Compensation Insurance Certificate and Campbell County Occupational License.*

3. PROPOSED BUILDING ACTIVITY ☐ New Construction ☐ Remodeling ☐ Addition
☐ Site-built Single-family Dwelling ☐ Manufactured Home ☐ Modular Home # Bedrooms ____
 Other (describe) _____

4. ESTIMATED COST _____ **5. HVAC:** ☐ No ☐ Yes – HVAC License # _____

6. TYPE OF SEWAGE DISPOSAL
☐ Public Sewers (Sanitation District 1)
☐ Septic System *Attached a copy of the "Onsite Sewage Disposal System Construction Permit"*
☐ Private Waste Water Treatment Plant *"Attached copy of Division of Water Construction Permit"*

7. TYPE OF WATER SUPPLY ☐ Cistern ☐ Pendleton County Water District
☐ Northern KY Water Service District *Attach "Water Service Tap Review form"*

8. ENCROACHMENT PERMIT
☐ County Road *Attach completed Campbell County Road Dept. Encroachment Permit Application*
☐ State Road *Attach Kentucky Dept. of Highways Encroachment Permit*
☐ Private Road *Attach copy of deed restrictions or right-of-way easement*

9. FLOODPLAIN Is project located in a Floodplain? ☐ Yes ☐ No
If yes, attach copy of "Kentucky Division of Water Construction Permit"

10. **STEEP SLOPE** Is this project located on a Hillside Slope of 20% or Greater? ☐ Yes ☐ No
If yes, Project must be designed in accordance with Campbell County Hillside Development Controls

11. **APPLICANT SIGNATURE** I hereby certify that the information contained in this application and attachments is true and correct and that any misrepresentations or misstatement of facts shall be grounds for denial or revocation of the permit.

PRINT NAME _____

SIGNATURE _____ **DATE** _____

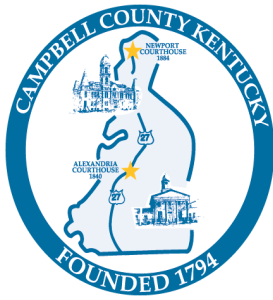
All fees are non-refundable. Permit fees are doubled if the building has been started prior to issuance of the building permit.

Check which documents are submitted with this application:

- ☐ Two sets of building plans
- ☐ Two copies of site plan
- ☐ Copy of Plat
- ☐ Copy of Deed
- ☐ Construction Affidavit
- ☐ Contractors Occupational License
- ☐ Liability Insurance Certificate
- ☐ County or State Road Encroachment Permit
- ☐ House Number Application
- ☐ Water Service Tap Review (No. KY Water Dist.)
- ☐ Septic System Construction Permit
- ☐ Permit fee, payable to Campbell County Planning and Zoning

INFORMATION BELOW TO BE COMPLETED BY BUILDING OFFICIAL

<u>APPLICATION NO.</u>	FEES	DATE RECEIVED _____
Building _____	Building _____	APPROVED APP. W / CONDITIONS
Zoning _____	Zoning _____	<input type="checkbox"/> Building <input type="checkbox"/> Building
Electrical _____	Electrical _____	<input type="checkbox"/> Zoning <input type="checkbox"/> Zoning
Encroachment _____	Encroachment _____	Permit Issued _____
	CO _____	by _____
ZONE _____	Late Penalty _____	
Sq. footage _____	Total Fees _____	Rec. _____ <input type="checkbox"/> Check no. _____ <input type="checkbox"/> Cash



CAMPBELL COUNTY PLANNING & ZONING

1098 Monmouth Street, Suite 343

Newport, KY 41071

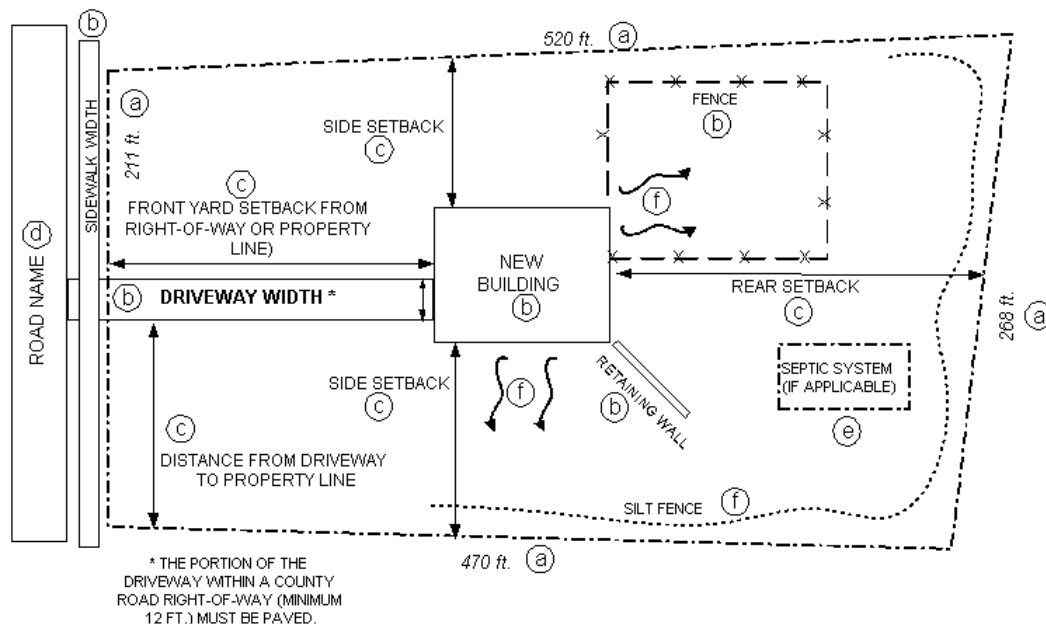
Phone (859) 292-3880 Fax (859) 547-1868

www.campbellcountky.org

RESIDENTIAL BUILDING PERMIT INSTRUCTIONS

Please fill out the application in its entirety (all spaces) and be sure to sign it on the back. Place N.A. for all items not applicable. Attach the following:

1. A copy of the approved and recorded plat (if applicable).
2. Two sets of building plans. One set will be returned to you.
3. Two copies of a site plan similar to the example below, drawn to scale including the following:
 - a) A footprint sketch showing the shape and dimensions of the lot.
 - b) The location and dimensions of all existing and proposed buildings or additions to existing buildings; sidewalks; driveways; retaining wall and fences.
 - c) The front, side and rear setback dimensions (in feet) from property lines or right-of-ways to any existing or proposed structures.
 - d) The location and names of all existing roads, indicating whether they are public or private; and any right-of-ways and access easements of record.
 - e) The location of all utilities and septic systems when applicable.
 - f) Provisions for erosion control and surface water drainage.



4. Existing topography map, shown by contours with intervals not to exceed 5 (five) feet.

5. A copy of the construction permit from Northern Kentucky Independent Health District for an on-site sewage disposal system. A copy of your site evaluation for existing on-site sewage disposal systems, if applicable.
6. An approved Water Service Tap Review form (enclosed) if water service is provided by the Northern Kentucky Water District.
7. A Construction Affidavit (enclosed) pursuant to KRS 342.610 (5) to be completed by the applicant; or proof of Kentucky's Workers Compensation Insurance.
8. A copy of the applicant's Liability Insurance Certificate.
9. A copy of your contractor's Occupational License.
10. A completed Campbell County Road Department Encroachment Permit Application (enclosed) if the property will be accessed from a County Road.
11. A completed House Number Application (enclosed) if the property does not already have an address.

Helpful Telephone Numbers

Electrical Inspectors

Steve Helmer.....859-746-9111

Tom Studer.....859-431-0777

Plumbing Inspector

Tom Boone.....859-341-8228

Sanitation District No. 1.....859-331-6674

Northern KY Water District.....859-578-9898

Pendleton Co. Water District.....859-654-6964

Northern KY District Health Dept.....859-341-4246

Campbell Co. Occupational License Dept.....859-292-3884

Campbell Co. Road Dept.....859-635-9100

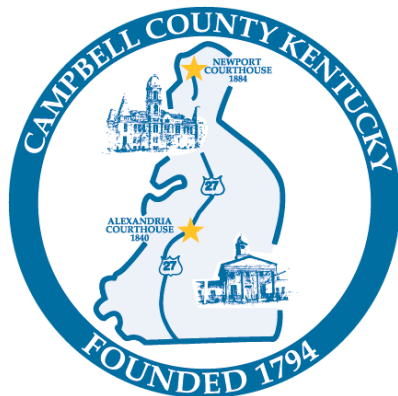
State Highway Dept.....859-341-2700

Duke Energy / UHL&P.....1-800-544-6900

Owen Electric Co-Op.....859-472-2600

Call BUD (Before U Dig).....1-800-752-6007

Cincinnati Bell – (new service).....513-565-221



House Number Application

Campbell County and Municipal Planning & Zoning Commission

1098 Monmouth Street, Suite 343

Newport, Kentucky 41071

Phone: (859) 292-3880

Fax: (859) 547-1868

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Part A (to be filled out by applicant)

1. Road name where address requested _____

Attach plot /site plan showing driveway access point and house location (if known)

2. Owner _____

Address _____

City, State, Zip _____

Phone _____ Fax _____ email _____

3. Distance to nearest neighbor to left _____ feet

Neighbor's name _____

Address _____

4. Distance to nearest neighbor to right _____ feet

Neighbor's name _____

Address _____

5. Applicant's Signature _____ Date _____

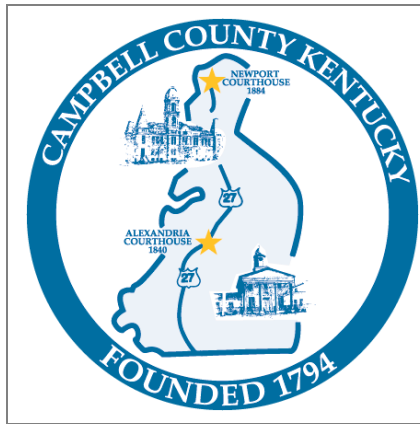
Part B (to be filled out by Campbell County Staff)

1. Has all the Information been Supplied? _____

2. House Number Assigned _____

3. Reviewed by _____

4. Reviewer Signature _____ Date _____



Construction Affidavit

Campbell County and Municipal Planning & Zoning Commission

1098 Monmouth Street, Suite 343

Nowport, Kentucky 41071

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Fax: (859) 547-1868

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Comes the Applicant, _____ and states, pursuant to KRS 198B.060(10), that all Contractors and Sub-Contractors employed or that will be employed on any activity covered by any permit issued to this applicant by the Campbell County Codes Administrator's Office shall be in compliance with the Commonwealth of Kentucky requirements for Workers' Compensation Insurance (according to KRS Chapter 342) and Unemployment Insurance (according to KRS Chapter 341).

This the _____ day of _____, 20_____.

Signature of Applicant

Subscribed and sworn before me by _____, Applicant,
on the _____ day of _____, 20_____.

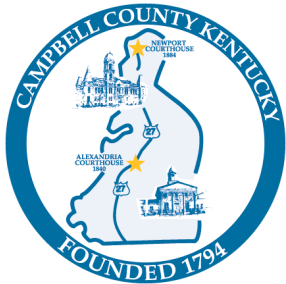
Notary Public _____

My Jurisdiction is _____

My Commission Expires _____

Note: Affidavits issued for electrical permits must contain proof of general liability insurance of not less than two hundred and fifty thousand dollars (\$250,000) which is in effect.

BP no. _____ Encroachment Permit no. _____



Encroachment Permit Application

Campbell County Road Department

1175 Racetrack Road

Alexandria, Kentucky 41001

Phone: (859) 635-9100

Fax: (859) 635-2059

Section A (to be completed by applicant)

1. Jurisdiction/Location:

- € Unincorporated Campbell County € City of Melbourne € City of Woodlawn
€ City of Crestview € City of Silver Grove € Other: _____

2. Applicant:

Name _____

Contact Person _____

Address _____

City _____ State _____ Zip _____

Phone Number _____ Fax Number _____

3. Project Location:

Address _____

City _____ State _____ Zip _____

4. Type of Encroachment:

- ☐ Residential Entrance ☐ Commercial Entrance ☐ Industrial Entrance
☐ Farm Entrance ☐ Other _____

5. (I/We) hereby certify that all the information contained in this application is true and complete to the best of my knowledge. Further, (I/We) will comply with the terms and conditions under which the encroachment permit hereby applied for is issued.

Signature of Applicant _____ Date _____

(OVER)

Section B (To Be Completed By The Road Department Supervisor)

Pipe Size Required (12" Minimum): _____ Pipe Material: _____

Projected Date of Installation: _____

Special Instructions to the Applicant: _____

Permit Approved By: _____

Road Department Supervisor

Date

Final Inspection Approved By: _____

Codes Administrator

Date



Water Service Tap Review

Northern Kentucky Water District

2835 Crescent Springs Road

Erlanger, Kentucky 41018

Phone: (859) 578-9898

Fax: (859) 578-7893

Section A (to be completed by applicant)

1. Jurisdiction/Location (check one):

☐ Unincorporated Campbell County

☐ City of Melbourne

☐ City of Woodlawn

☐ City of Crestview

☐ City of Silver Grove

☐ City of Dayton

☐ City of California

2. Applicant:

Name _____

Contact Person _____

Address _____

City

State

Zip

Phone Number _____ Fax Number _____

3. Project Location:

Address _____

City

State

Zip

4a. Type of Water Service (check one):

☐ NKWD (complete 4b. below)

☐ Cistern

☐ Well

4b. Type of Water Main (check one):

☐ Residential Entrance

☐ Commercial Entrance

☐ Industrial Entrance

☐ Farm Entrance

☐ Other _____

5. (I/We) hereby certify that all the information contained in this application is true and complete to the best of my knowledge. Further, (I/We) will comply with the terms and conditions under which the water service permit hereby applied for is issued.

Signature of Applicant _____ Date _____

Section B (To Be Completed By the Water Department Supervisor)

Pipe Size at location:_____ Pipe Material:_____

Comments:_____

(☐ Approved / ☐ Denied) By:_____

Water Department Supervisor

Date